

**HAWAII STATE ETHICS COMMISSION**  
1001 BISHOP STREET, PACIFIC TOWER 970  
P.O. BOX 616, HONOLULU, HAWAII 96809  
TEL: 587-0460 FAX: 587-0470  
email: [ethics@hawaiiethics.org](mailto:ethics@hawaiiethics.org)

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STATE OF HAWAII  
STATE ETHICS COMMISSION

R2000/  
UH PA

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

<b>PART I LOBBYIST</b>			
NAME(Last)	(First)	(Middle)	TELEPHONE
RADCLIFFE, John H.			(808) 593-2157
MAILING ADDRESS (Street)			FAX
1017 Palm Drive			(808) 593-2160
(City)	(State)	(Zip Code)	
Honolulu, HI	96814		
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
University of Hawaii Professional Assembly			(808) 593-2157
MAILING ADDRESS (Street)			FAX
1017 Palm Drive			(808) 593-2160
(City)	(State)	(Zip Code)	
Honolulu, HI	96814		

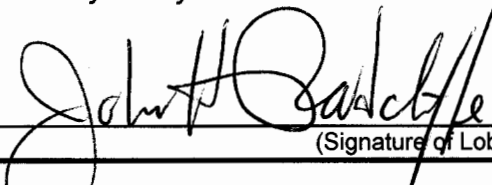
<b>PART II ORGANIZATION</b>		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE	
University of Hawaii Professional Assembly	(808) 593-2157	
MAILING ADDRESS (Street)	FAX	
1017 Palm Drive	(808) 593-2160	
(City)	(State)	(Zip Code)
Honolulu, HI	96814	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
John H. Radcliffe		(808) 593-2157
MAILING ADDRESS (Street)		FAX
1017 Palm Drive		(808) 593-2160
(City)	(State)	(Zip Code)
Honolulu, HI	96814	

**PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY**

- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Agriculture                              | <input checked="" type="checkbox"/> Education            | <input type="checkbox"/> Human Services                                     | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities        | <input type="checkbox"/> Government Operations & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation                       |
| <input type="checkbox"/> Consumer Protection & Commerce           | <input type="checkbox"/> Hawaiian Affairs                | <input checked="" type="checkbox"/> Labor & Employment                      | <input type="checkbox"/> Transportation                             |
| <input type="checkbox"/> Culture, Arts, Historic Preservation     | <input type="checkbox"/> Health                          | <input type="checkbox"/> Planning, Land & Water Use Management              | <input type="checkbox"/> Other: (indicate below)                    |
| <input type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing                         | <input type="checkbox"/> Public Safety & Corrections                        |   |

**PART IV CERTIFICATION OF LOBBYIST**

*I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.*



(Signature of Lobbyist)

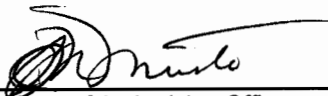
January 10, 2005

(Date)

**PART V AUTHORIZATION TO LOBBY**

NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	
J.N. Musto		Executive Director	
NAME OF ORGANIZATION (if applicable)		TELEPHONE	
University of Hawaii Professional Assembly		(808) 593-2157	
MAILING ADDRESS (Street)		FAX	
1017 Palm Drive		(808) 593-2160	
(City)	(State)	(Zip Code)	
Honolulu, HI 96814			

*I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.*



(Signature of Authorizing Officer or Person Represented)

1/12/05

(Date)